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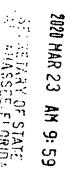
(Requestor's Name)
(Address)
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(Business Entity Name)
(Business Entity Name)
(Document Number)
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Special Instructions to Filing Officer:

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APR 06 2020 M. SOLOMON

COVER LETTER

SUBJECT: MEGLEY MARINE, LLC				
Name of Li	mited Liability C	ompany		
DOCUMENT NUMBER: L13000030819				
The enclosed Resignation of Registered Agent for filing.	for a Limited L	iability Company and fee are submitted		
Please return all correspondence concerning th	is matter to the	following:		
United States Corporation Agents, Inc.				
Name of Person	·			
Legalzoom.com, Inc.				
Name of Firm/Company				
101 North Brand Blvd. 11th Floor				
Address				
Glendale, CA 91203				
City/State and Zip Code				
raresignations@legalzoom.com				
E-mail address: (to be used for future annual report	t notification)			
For further information concerning this matter	. please call:			
Janna Pantoja	. , 800 , 7	73-0888 x3950		
Name of Person	Area Code [Paytime Telephone Number		
Enclosed is a check made payable to the Floric liability company or \$25.00 for an administrationability company.	la Department o vely dissolved,	f State for \$85.00 for an active limited voluntarily dissolved or withdrawn limited		
MAILING ADDRESS:		ADDRESS:		
Registration Section		Registration Section Division of Corporations		
Division of Corporations P.O. Box 6327	Division of Clifton Bu	•		
	CITION DO	monig		

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

TO: Registration Section Division of Corporations

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provi	sions of section 605.0115. Florida Statutes, the undersig	gned.	
United States Co	prporation Agents, Inc.	ereby resigns as	
	Name of Registered Agent	ready tradegree ea	
Registered Agent for			
	Name of Limited Liability Company		
L13000030819			
Documen	t Number, if known		
A copy of this resign	ation was mailed to the above listed limited liability cor	npany at its last known address.	
The agency is termin	ated and the office discontinued on the 31st day after th	e date on which this statement is f	iled.
	Signature of Resigning Agent		2020 HAR 23
If signing on behalf of	of an entity:	Į.	E T
	Cheyenne Moseley		23
	Typed or Printed Name		R []
	Asst. Secretary for United States Corporation Agent	is, Inc.	Ġ D
	Capacity		Ω.

FILING FEES:

\$ 85.00 Active limited liability company \$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314